

SERIAL NUMBER	FILING DATE	CLASS	GROUP ART UNIT	ATTORNEY DOCKET NO.
09/411,407	09/30/99	709	2756	042390.P7090

APPLICANT THOMAS L. STACHURA, PORTLAND, OR; MICHAEL K. CLINE, PORTLAND, OR; ANIL VASUDEVAN, HILLSBORO, OR.

\*\*CONTINUING DOMESTIC DATA\*\*\*\*\*

VERIFIED

None AM

\*\*371 (NAT'L STAGE) DATA\*\*\*\*\*

VERIFIED

None AM

\*\*FOREIGN APPLICATIONS\*\*\*\*\*

VERIFIED

None AM

IF REQUIRED, FOREIGN FILING LICENSE GRANTED 10/22/99

Foreign Priority claimed 35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance	STATE OR COUNTRY	SHEETS DRAWING	TOTAL CLAIMS	INDEPENDENT CLAIMS
Verified and Acknowledged	<u>AM</u> Examiner's Initials	OR	14	23	3

ADDRESS ALOYSIUS T C AUYEUNG  
C/O BLAKELY SOKOLOFF TAYLOR & ZAFMAN LLP  
12400 WILSHIRE BOULEVARD  
7TH FLOOR  
LOS ANGELES CA 90025

TITLE METHOD AND APPARATUS FOR PERFORMING NETWORK-BASED CONTROL FUNCTIONS  
ON AN ALERT-ENABLED MANAGED CLIENT

FILING FEE RECEIVED	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT NO. _____ for the following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
\$814		